

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

RECEIVED  
CENTRAL FAX CENTER

APR 26 2005

APPLICANT: Lu  
SERIAL NO.: 09/821,509 GROUP NO.: 2642  
FILED: March 29, 2001 EXAMINER: Tieu, Benny Quoc  
TITLE: Method and System for Inhibiting Softswitch Overload

**CERTIFICATE OF FACSIMILE TRANSMISSION**

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, are being faxed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 at Facsimile No. (703) 872-9306 on this 26 day of April, 2005.

  
Jamie Crystal-Lowry

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Submitted herewith are:

- Revocation of Attorney with new Power of Attorney and Change of Correspondence Address (2 pages)
- Certificate of Facsimile Transmission under 37 C.F.R. 1.8 (1 page)
- Transmittal Form (1 page)

# TRANSMITTAL FORM

Application Serial Number	09/821,509
Filing Date	March 29, 2001
First Named Inventor	Lu
Group Art Unit	2642
Examiner Name	Tieu, Benny Quoc
Attorney Docket No.	SNS-010
Patent No.	Not yet assigned
Issue Date	Not yet assigned

## ENCLOSURES (check all that apply)

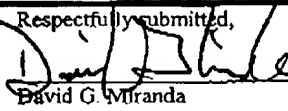
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form  <input type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]  <input type="checkbox"/> Petition for Extension of Time  <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553)  <input type="checkbox"/> Formal Drawing(s)  <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input checked="" type="checkbox"/> Power of Attorney (Revocation of Prior Powers)  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application  <input type="checkbox"/> Small Entity Statement  <input type="checkbox"/> CD(s) for large table or computer program  <input type="checkbox"/> Amendment After Allowance	<input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)  <input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences  <input type="checkbox"/> Appeal Brief (in triplicate)  <input type="checkbox"/> Status Inquiry  <input type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8  <input type="checkbox"/> Additional Enclosure(s) (please identify below)
---	--	--

## CORRESPONDENCE ADDRESS

Direct all correspondence to: Patent Administrator  
Proskauer Rose LLP  
One International Place  
22<sup>nd</sup> Floor  
Boston, MA 02110-2600  
Tel. No.: (617) 526-9600  
Fax No.: (617) 526-9899

## SIGNATURE BLOCK

Date: April 26, 2005  
Reg. No.: 42,898  
Tel. No.: (617) 526-9620  
Fax No.: (617) 526-9899

Respectfully submitted,  
  
David G. Miranda  
Attorney for the Applicant(s)  
Proskauer Rose LLP  
One International Place  
22<sup>nd</sup> Floor  
Boston, MA 02110-2600

**REVOCATION OF POWER OF  
ATTORNEY WITH  
NEW POWER OF ATTORNEY  
AND  
CHANGE OF CORRESPONDENCE ADDRESS**

I hereby revoke all previous powers of attorney given in connection with the application and patents identified in Appendix A:

☐

A Power of Attorney is submitted herewith.

OR

☒

I hereby appoint the practitioners associated with at Customer Number:

42532

☐

Please change the correspondence address for the above-identified application to:

☒

The address associated with  
Customer Number:

42532

OR

☐

Firm or  
Individual Name

Proskauer Rose LLP

Address

One International Place

Address

City

Boston

State

MA

Zip

02110

Country

Telephone

617-526-9600

Fax

617-526-9899

I am the:

☐

Applicant/Inventor.

☒

Assignee of record of the entire interest.

The assignee of record of the entire right, title, and interest of the patents identified in Appendix A, in accordance with 37 C.F.R. § 3.73(b), is Telecom Technologies, Inc., organized and existing under the laws of the state of Texas, having a usual place of business at 1701 N. Collins BLVD. Richardson, Texas 75080.

**SIGNATURE of Applicant or Assignee of Record**

Name and Title

Charles A. Gray, Secretary

Signature

*Charles A. Gray*

Date

April 15, 2005

Telephone

978-614-8505

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒

\*Appendix A is included as an additional sheet.

# APPENDIX A

<i>Attorney Docket No.</i>	<i>Application No./ Patent No.</i>	<i>Filing Date/ Issue Date</i>	<i>First Named Inventor</i>	<i>Group Art Unit</i>	<i>Examiner Name</i>	<i>Recordation Information</i>
SNS-009	09/821,507	03/29/2001	Kaczmarczyk	2664	Shew, John	Recorded 03/29/2001 on: Reel No. 011672 Frame No. 0608
SNS-010	09/821,509	03/29/2001	Lu	2642	Tieu, Benny Quoc	Recorded 03/29/2001 on: Reel No. 011672 Frame No. 0593
SNS-011	09/821,508	03/29/2001	Kaczmarczyk	2662	Not yet assigned	Recorded 03/29/2001 on: Reel No. 011672 Frame No. 0614
SNS-012	6,775,269	08/10/2004	Kaczmarczyk	2661	Sam, Phirin	Recorded 07/06/2000 on: Reel No. 010891 Frame No. 0184
SNS-013	09/538,040	03/29/2000	Kaczmarczyk	2666	Abelson, Ronald B.	Recorded 07/06/2000 on: Reel No. 010891 Frame No. 0138